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FOIA MARKER

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FolderID:

Folder Title:
[United Hospital Fund Outline] [loose]

Stack:	Row:	Section:	Shelf:	Position:
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United hospital fund outline 10/15

research

Security
Simplicity
Choice
Savings
Quality

Responsibility

HIV & Health Care Reform –

Both good & worrisome

1) get coverage

   affected population = ↑ uninsured

   ~~fears of loss of coverage~~

   comp. benefit pkg – (problem when state or private co. is generous)

   - Rx drugs
   - home care
   - Substance abuse Rx
   - Choice

2) equitable continuous coverage

   lifetime limit

   not dx specific

   not cancellable

3) risk adjustment for providers

4) quality & outcomes

   how to define

   the chronic disease worry

   (Lovelace study Oregon)

5) data / confidentiality

"The perfect is the enemy of the good"

Coverage for prisoners?

commitment to transition —

subsidies for low income —

Jim Tallon call from Pres?

Ben [illegible] 974-6400 [illegible]

Nsg & AIDS

AIDS policy - research
care
prevention

1) Care givers -
developing the role/ Research

2) preventers

3) community leaders

Reshaping the debate

substance abuse
sexuality

security
simplicity
savings
quality
choice
responsibility

Nsg Role in Natl Health Policy

PH Nsg - cutting edge / built its own boxes -

The issues confronting the nation -
- not everyone insured
- not everyone paying in
- perverse $ incentives
- entrepreneurial structure

put last -

The issues confronting nsg -
- limited membership in prof. org.
- mixed entry / image
- lack of documentation — dimission of reality "oldest living nurse model -

The opportunity -

security - compliance? undocumented

simplicity - do we really buy in? cadre example?

savings - though we may need more $ = hard to justify

quality - what is our prof. commitment? how do we choose our prof. colleagues

choice - our own? neighborhood / community health centers

responsibility = payment

10/26 Model Standards

PH After Reform

PH: doesn't ignore personal health (but):
providing it becomes an option
(do I want to do it, can I serve this
population well, does it interest a
ph. - such as IB therapy)
Can focus on the whole population -
cycles & overlaps in planes
population based
Surveillance - health ~~of~~ status
threats to health
capacity of system
~~Mandatory services~~
regulatory programs } safe water, epidemic
disease control } control
outreach & linkage - to connect people & system
quality assurance -

Will demand -
- sophistication in data gathering & analysis
timeliness / level of analysis
- what is entered - e.g. unit of analysis by epi or health ed
- rethinking expectations of outcome
HP 2000 interesting
ex = HIV #'s
- rethinking approach to quality -
out of old licensure mode -
beyond minimally safe to best practice
- not only of personal care system
but of ourselves - account ability

Michele Iverson